Mile .	,							
		PTO/SB/22 (10-0						
PETITION FOR EXTENSION OF	F TIME UNDER 37 CFR 1.136(a)	Docket Number 0756-2062						
CERTIFICATE OF MAILING	In re Application of Shunpei Y	'AMAZAKI						
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to	Application 09/433,705 Number	Filed November 4, 1999						
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on January 12,	For SEMICONDUCTOR DEVICE HAVING LDD REGIONS							
2004. achte M Stamper	Group Art Unit	Examiner S. Loke						
This is a request under the provision for filing a reply in the above identification. The requested extension and appropriate (check time period desired):	ons of 37 CFR 1.136(a) to extend the fied application.							
☐ One month (37 CFR 1	.17(a)(1)) - (\$55/\$110)	\$ 110.00						
	.17(a)(2)) - (\$210/\$420)	\$ \$						
☐ Three month (37 CFR	1.17(a)(3)) - (\$475/\$950)	\$						
Four month (37 CFR 1	.17(a)(4)) - (\$740/\$1480)	\$						
Five month (37 CFR 1	.17(a)(5)) - (\$1005/\$2010)	\$						
<u> </u>	atus. See 37 CFR 1.27. Therefore e-half, and the resulting fee is \$	e, the fee amount						
☐ A check in the amount of the fe	ee is enclosed.							
☐ Payment by credit card. Form	PTO-2038 is attached.							
☐ The Commissioner has already Deposit Account.	y been authorized to charge fees in	this application to a						
▼	uthorized to charge any fees which Deposit Account Number 50-2280.	_						
I am the applicant/inventor								
1 · · · · · · · · · · · · · · · · · · ·	of the entire interest. See 37 CFF der 37 CFR 3.73(b) is enclosed. (F							
attorney or agent of	of record.							
	under 37 CFR 1.34(a). umber if acting under 37 CFR 1.34	(a)						
	s form may become public. Credit ide credit card information and auti							
	130	A Felace						
<u>January 12, 2004</u>		Signature						

January 12, 2004 01/15/2004 WASFAW1 00000024 502280 Date 09433705

110.00 DA

01 FC:1251

Robert L. Pilaud, Reg. No. 53,470
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of forms are submitted.

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE	TRA	NS	MIT	ΓΑΙ
]	FOR	FY	2004	ı

Effective 10/01/2003. Patent fees are subject to annual revision. ☐ Applicant Claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAVMENT

Signature

(\$) 110 00

	Complete if Known
Application Number	09/433,705
Filing Date	November 4, 1999
First Named Inventor	Shunpei YAMAZAKI
Examiner Name	S. Loke
Group Art Unit	2811
Attorney Docket No.	0756-2062

Date

January 12, 2004

TOTAL AMO	UNI OF I	AINL	(4)	110.00	Attor	liey Do	CKCI IN	U.	0/36-2062		<u> </u>	
METHOD OF PAYMENT			•		FEE CALCULATION (continued)							
1. X The Commissioner is hereby authorized to charge indicated		licated	3. ADDITIONAL FEES									
fees and	credit any o	verpaymen	its to:			Larg Entit	-	Small Entity				
Deposit Account Number	50-2280	0			Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Desc	ription		Fee Paid
Deposit	Dobins	on Intel	lectual Property		1051 1052	130 50	2051 2052		Surcharge – late fil Surcharge – late pr	_	e or cover sheet	
Account Name	Law Of		lectual Property		1053	130	1053	130	Non-English specif	fication		
. Charge		15.5		 -	1812	2,520	1812	2,520	For filing a request	for ex parte reexa	amination	
	Any Addition 7 CFR 1.16		- .		1804	920*	1804	920*	Requesting publica	tion of SIR prior	to Examiner action	
_	verpayments				1805	1,840*	1805	1,840*	Requesting publica	tion of SIR after I	Examiner action	
	nt claims sm	all entity st	tatus.		1251	110	2251	55	Extension for reply	within first mont	h	\$110.00
[75]	nt Enclose	-d:	<u>-</u>		1252	420	2252	210	Extension for reply	within second me	onth	
	_	lit Card		➤ Other	1253	950	2253	465	Extension for reply	within third mon	th	
Check	Cred	nt Card	☐ Money Order	Other Coner	1254	1,480	2254	740	Extension for reply	within fourth mo	onth	
· · · · · · · · · · · · · · · · · · ·	FER	CALCI	JLATION		1255	2,010	2255	1005	Extension for reply	within fifth mont	th	
1. BASIC FIL					1401	330	2401		Notice of Appeal			
Large Entity	Small En	itity			1402	330	2402		Filing a brief in sur	pport of an appeal		
Fee Fee	Fee F	ee Fe	e Description		1403	290	2403		Request for oral he			
Code (\$)	Code (S	S)		Fee Paid	1				•		1;	
1001 770	.2001 38	35 Ut	tility filing fee			1,510	1451	-	Petition to institute	, -	eeaing	
1002 340	2002 17		esign filing fee	<u> </u>	1452	110	2452		Petition to revive -			
1003 530	2003 26	55 Pla	ant filing fee			1,330	2453		Petition to revive –			
1004 770	2004 38	35 Re	eissue filing fee			1,330	2501		Utility issue fee (or	r reissue)		
1005 160	2005 8	30 Pr	ovisional filing fee		1502	480	2502		Design issue fee			
					1503	640	2503		Plant issue fee			
	S	UBTOT	AL (1) (\$)		1460	130	1460	130	Petitions to the Cor	mmissioner		
2. EXTRA CL	AIM FEE	S			1807	50	1807	50	Processing fee und	er 37 CR 1.17(q)		
		Extra (Fee from Claims below	Fee Paid	1806	180	1806	180	Submission of Info	rmation Disclosus	re Stmt	
Total Claims Independent	-20*		X \$18 =		8021 1809	40 770	8021 2809		Recording each pat number of properti- Filing a submission	es)		
Claims Multiple Depende				[1810	770	2810		§ 1.129(a)) For each additional		•	
Large Entity Fee Fee	Small En Fee F	•	e Description		1801	770	2801	385	§ 1.29(b)) Request for Contin	ued Examination	(RCE)	
Code	(\$) Code		-		1802	900	1802	900	Request for expedia	ted examination o	of a design	
1202 18	2202	9 Cl	aims in excess of 20		Other	fee (spe	cify) <u>Te</u>	rminal	<u>Disclaimer</u>			
1201 86	2201 4	13 Inc	dependent claims in e	xcess of 3								
1203 290	2203 14	15 M	ultiple dependent clair	m, if not paid	* Red	uced by	Basic F	iling Fe	e Paid	SUBTOTAL (3)	(\$)110.00	
1204 86	2204 4	13 **	Reissue independent	claims over								
1205 18	2205		iginal patent	pess of 20 and					CERTIFICA	TE OF MAILING		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent SUBTOTAL (2) (\$)			 .				this correspondence is	being deposited with	h the United States Posta			
				ent postag 313-1450				ΔI	er for Patents, P.O. Box	1450, Alexandria,		
					·		ciculity	Stampe	\sim			
**or number previously paid, if greater; For Reissues, see above			1									
SUBMITTED	ВҮ	D . 1	4 T D:1- 1		Doo:	otuntin-	NIC	60	470	Complete (if a		20
Name (Print/Ty	pe)	Kober	t L. Pilaud		•	stration rney/Ag		33	,470	Telephone	(571) 434-678	jy